

Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)	<i>Complete if Known</i>	
	Application Number	10/018,237
	Filing Date	June 24, 2002
	First Named Inventor	Christian Hogl
	Group Art Unit	3696
	Examiner Name	Ojo Oyeibisi
Sheet 1 of 2	Attorney Docket No: 2043.184US1	

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Examiner Initials*	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ¹
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EXAMINER**DATE CONSIDERED**

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant is to place a check mark here if English language Translation is attached

Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center; font-weight: normal;">Complete if Known</th> </tr> <tr> <td style="width: 35%;">Application Number</td> <td>10/018,237</td> </tr> <tr> <td>Filing Date</td> <td>June 24, 2002</td> </tr> <tr> <td>First Named Inventor</td> <td>Christian Hogn</td> </tr> <tr> <td>Group Art Unit</td> <td>3696</td> </tr> <tr> <td>Examiner Name</td> <td>Ojo Oyevisi</td> </tr> </table>	Complete if Known		Application Number	10/018,237	Filing Date	June 24, 2002	First Named Inventor	Christian Hogn	Group Art Unit	3696	Examiner Name	Ojo Oyevisi
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